STATE OF NEW HAMPSHIRE 2017 Statement of Income and Expenses

for LOBBYISTS
(RSA Chapter 15)

RECEIVED

OCT 24 20%

NEW HAMPSHIRE DEPARTMENT OF STATE

PLEASE PRINT

I. Name of Lobbyist(s	JOD1	E. 6	Frimbil	as		
II. Name of lobbyist's	s partnership, firm (or corporation, if an	ıy:			
J. 6	rimbilas ne of partnership, firm	Strategic	Soluti	ions LU	<u> </u>	
Λ . `	33	Volthwace	od.	NH (State)	03261	
(613 <u>496 -</u> (Telephone)	2638)(Fax)	e-n	nail Jodi	@jostrategies.co	m.
III. This statement co reportable expense tr					y file a separate report for	
☐ All reportable tran	sactions occurring in	the months prior to t	the reporting da	ate relative to the	e following client:	
		CVS Her				
OR	(Full Name of Client	as it appears on the Lob	bbyist Registration	on Form)		
		ist (including the lobb	byist's family),	or the lobbying	firm listed below which are	
IV. Date of Report Reports cover: activ	April 26, 2017 ity from date of registr			6, 2017 4/1/17 to 6/30/17		
	October 25, 2017 activity from 7/1/17 to			ry 31, 2018 10/1/17 to 12/31/	717	
V. There have been If this box is checked, Concord, NH 03301.	no fees received a complete just this for	and no reportable m and submit it to th	transactions e Secretary of	made since tl State's Office, S	ne last report tate House, Room 204,	
VI. Check if addition	-					
If you have receiv	•	=				
Expense Reimburseme		nbursed expenses, yo	u musi ilic Au	uendum b– Kcj	ort of Henorariums or	
If you, your firm,	or your family has m	ade political contribu	utions, you mus	st file Addendu	m C- Political Contributions	
Sworn Statement/Afi I have read RSA I5, R and complete to the be	RSA 15-B, RSA 14-C	and RSA 664 and he	ereby swear or	affirm that the f	oregoing information is true	
(Signature of lobbyis	inhlig		10	24 17. (Dat	<u>c)</u>	
(Signalure of lobbyis) (Print Name of lobby)						

P L E A S E P R I N T

STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

RECEIVED

OCT 2 4 2017

(RSA Chapter 15:6)

NEW HAMPSHIRE DEPARTMENT OF STATE

I. Name of Lobbyist(s) Josi E. Grimbilas	
II. Name of lobbyist's partnership, firm or corporation, if any:	
J. Grimbulas Strategic Solutions (Name of partnership, firm or corporation)	LLC.
(Name of partnership, firm or corporation) III. Name of Client C US Health	
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The groreduced by any expenses:	relations, or public relations services
a) Total of all fees received in this reporting period	a) \$ /2,500.01
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year).	b) \$ 23,521,55 ear)
c) Total of all fees received to date (Add lines a and b)	c) \$ 36,021.56
 d) Indicate the amount of any such fees that are due, but have not yet been paid 	d) \$
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to repfees. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report of Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of less being lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greater restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported.	elient and if expenditures are made by may be filed for the lobbyist(s)/firm. aggregate total of all expenses paid agenses; (b) the aggregate total of all le: meals purchased during a business as than \$10 that is given to the person of with a value of \$25.00 or less); and orting period of greater than \$25.00 for lee of greater than \$25, purchase of a ler than \$25, but not greater than \$50, expense reimbursement, or political
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a)\$_/2,500.01
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$
a) Total of all itemized expenditures reported in detail in section VI	c) \$

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$ /2, 500. 01
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	c) \$ 23,521.55
f) Total of all expenses year to date	ns 36, 021, 56
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leperiod, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
•	
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.	m that the foregoing information
Jodi Gumhais	10/24/17
(Signature of lobbyist)	(Date)
(Signature of lobbyist) Too i Grumbulas (Print Name of lobbyist)	